Wilson, Quentin 2020

Dr. Quentin Wilson Oral History

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Dr. Quentin Wilson

Behind the Mask

February 11, 2021

GB: Good afternoon. Today is February 11, 2021, and my name is Gabrielle Barr. I'm the archivist at the Office of NIH History and Stetten Museum, and I have the pleasure of speaking with Dr. Quentin Wilson. Dr. Wilson is a clinical veterinarian at the NIH Division of Veterinary Resources, which is part of the Office of the Director, and today he's going to speak about some of his COVID-19 experiences as part of his role. Thank you very much for being with me.

QW: Thanks for having me.

GB: Absolutely. So as a veterinarian at NIH, what are your daily responsibilities?

QW: I guess most people don't realize that we do work with animals in the research setting. There's a whole team of people who are dedicated to providing for the health and welfare and husbandry of those animals. For my division, we make sure that we keep the animals housed appropriately [and] fed. We provide for their social [and] environmental well-being as much as possible but also for their clinical health so that's where the veterinarians come in. I would treat them just as I would anybody's pet or family member. If they are sick or need attention, I would provide treatments for that. [I] also provide preventative care so depending on the animal they might get routine dental cleanings [and] exams, but we do things on a regular basis to try to keep them up just like we would any other animal in our care. So that's kind of what I do on the veterinarian side. Even though it's with research animals, we still treat them with dignity and respect and keeping up their well-being.

GB: About how many animals do you care for in a day on average?

QW: We house several thousand animals, but on an individual day for me, I might have anywhere from 10 to 20 active cases that I'm following up on per day.

GB: Okay, interesting, and about how many veterinarians does NIH employ?

QW: There are many veterinarians in all different kinds of roles throughout NIH. Some are more administrative; some are on the research side; some are like me in a more clinical role, so there's a vast array of us doing different jobs to try to help provide for animals that we do use in research.

GB: Do you all specialize in certain things like big animals/small animals or do you take care all of them as individual veterinarians?

QW: It kind of depends. When we go to veterinary school, [it] tends to be more broad than focused. We just learned how to take care of the kind of common ones like cats, dogs, [and] livestock, and then for this kind of job, you have to do what's called a laboratory animal residency where we learn how to take care of animals that are more in the research setting. That would be like rodents and mice and rats but also primates, pigs, [and] dogs. There's a vast array of things that you might work with in a research setting. For me in particular, I like dealing with everything, so I tend to work with all different types of species.

GB: Interesting. How has the way that you perform your job been affected by COVID?

QW: As far as how I perform it, there hasn't been much of a change because a lot of what we do already involved wearing PPE for almost everything. For us, [it] kind of was different from a traditional veterinary hospital [where] you might have a lab coat on and maybe some gloves, but that's about it. But for us, we were already wearing masks and [word can't make out] and vinyl things so there wasn't for us a whole lot that had to change. And then since I'm more in a clinical role, I can't exactly work from home, so I was still coming into the office full time so at least in that aspect it was business as usual. What we did have to do is that we had to make some changes as far as the number of people here at one time. So we had to find creative ways to stagger people, so we didn't have so many people together at one time, to try to protect people. We had different shifts that would come in and rotate. As far as the schedule, we had to do something kind of different.

GB: Did you have to help figure that out or was that laid out by higher-ups at NIH?

QW: I would help as far as providing some input. [The] main thing that I helped with was trying to establish…something we were looking at was PPE and trying to prepare because we were aware that when the pandemic was going on you would hear stories about hospitals and other places running out of masks and vital equipment. I was part of the committee that was looking at ways that if we did run into supply issues, [were] there different ways that we could recycle equipment, sanitize it to reuse it, and also trying to set guidelines for using masks longer or having the appropriate mask to use if we're in close contact settings with another person.

GB: Did you all ever run out of PPE or come close to running out of PPE, or you always had enough supplies?

QW: Thankfully the NIH is very well prepared so I'm not aware of any animal programs that were affected. We were fortunate enough that we managed to keep our current supply. Although things did, of course, get more expensive, we were able to keep up the supply of PPE.

GB: That's really good. Did your daily operations change even within the timespan of the pandemic? So were things different in March, and then did they relax in the summer and become stricter again, or has anything like that changed over time?

QW: Something that originally changed were certain projects got kind of put on hold because we were doing those split shifts. Since we didn't have all the staff on campus at the same time, we kind of stretched thin to say the least. In the beginning, some projects got put on hold so that our staff wasn't overwhelmed, but then as things got under control, those projects started coming back. Our staff went back to more of a regular rotation, but we're still doing staggered shifts. We might have people coming at six, some people coming at seven so they're not all in locker rooms or taking their breaks at the same time.

GB: Yeah. Were you concerned at any point that you could be infected by the animals or that you inadvertently could pass the virus to the animals, and if so, what precautions did you have to take?

QW: So not so much getting it from the animals because we keep them in a pretty clean colony. If we're not giving them it, there's no reason they should get it. Our main concern at the time was since it was really new, we were initially concerned that, hey, could we give these to the animals—not so much the rodents or any other species but mostly the primates because they are so much with us, but what we found is that it is very difficult to transmit it from people to primates intentionally and then that's even an experimental setting, and in our setting we're wearing masks, we're wearing face covers and shields, so there's really no reason for them to come in contact with any respiratory secretions from us. On the staff side, we're doing our daily checks, checking in making sure that we're all healthy enough to be at work, and if we're not healthy enough we shouldn't be at work so I can say that we've had no instances of any human to animal transition of any sort.

GB: Oh that's really great. What has been your role in NIH's mission to research and combat COVID-19?

QW: For us, we get a lot of animals into quarantine. While they're in our charge, they might not necessarily be on a coronavirus protocol, but we do all their background health information, so making sure they're healthy enough to go on study. We'll do their preliminary physicals and blood work, make sure they're good to go, and then once they're ready then they'll ship out to another location to do that research. In that aspect, we make sure all the animals are healthy and well-suited for that type of research before they go on to the research.

GB: Yeah, I guess that took priority compared to some of the other things.

QW: Oh yeah, definitely! A lot of non-essential research had to get put on hold. While research is on hold, we're still taking care of the animals. None of that changed, but there weren't necessarily any research studies going on, but as things kind of progressed, I would say by the summer, some of those projects started coming back, and then by the fall, we were definitely kind of back in full swing.

GB: Can you speak a little bit about what you all do to prepare the animals for COVID-19 studies? You said you checked the blood, things like that.

QW: For those particular protocols, we want to definitely make sure they keep them as clean as possible. So, for when they come into a quarantine room, we'll have the staff wear an N-95 mask to try to make sure that we're not passing anything to those animals, and then we do certain viral screenings to make sure that when they come in they don't already have any pre-existing viruses, so no coronaviruses or no flu viruses or anything that could impact the study. Once we have confirmed through [the] bloodstream that they are free of any pathogens of concern, what we do then is TB [tuberculosis] testing and physical exams. If they have any health issues or anything, we might treat them, and then once they're good to go and we've confirmed that they're gaining weight, they're happy and healthy, then after they finish quarantine, then they'll move out to another facility.

GB: About how long does it take for the animals to do this initial check of them?

QW: Typically, our quarantines last for about three months or so, and that's just that's because let's just say, if they got infected by something right before they ship, it might take some time for that to appear. The quarantine has to last long enough that we know for sure that they're free of any pathogens that we are worried about, and then by the end of that time, we know for sure that they're good to go.

GB: Yes definitely. You spoke a little bit about it, but what challenges has COVID-19 presented for you in your work and also what opportunities has COVID-19 afforded your group?

QW: I'd say the some of the challenges are that of course you can't interact with people the way you used to. Normally in a work environment, you want to be able to hang out with people you know; you don't necessarily have all these masks in the way. You know [we] used to have office parties and potlucks and things. A lot of that had to stop. As far as the nature of my work as a veterinarian, that didn't so much change, but it was mostly the way I interact with my co-workers, and then for staff, they had to go on those split shifts or different alternative work schedules that got kind of taxing. But some opportunities that were afforded were we just we had to learn how to use the virtual environment, like we're meeting right now, or a personal meeting so [I] got really good at planning virtual meetings. And then I guess career-wise something I was able to help with was some of those initiatives, to look at ways to conserve PPE or make sure that our program had the correct kind of PPE to keep people safe. I was able to help with that as far as our animal programs.

GB: That's really wonderful. Would you mind sharing what were some of the creative ways of conserving PPE that you thought of and recommended?

QW: Probably the main one is the face masks. Typically, they're normally single use, so every time you're done with one, you toss them. Some basic things we would recommend were like if you go somewhere where you have to put on a mask, try to keep it throughout the day if it's not soiled, if there's nothing wrong with it, so then we're not just wasting. And then also something that we thought of but didn't necessarily have to do because we never ran out of it, was to see if there's ways to gas sterilize it. There were lots of research articles looking at ways to use vaporized hydrogen peroxide to sterilize the masks because it doesn't leave a residue. It doesn't damage them, and it keeps the integrity so that they're still useful. So [those] are some of the things we looked at and kind of even did like a trial and some [can't understand word] to see if it would work. So we kind of had that.

GB: How did the trial go?

QW: It seemed like it worked. The mask didn't have any residue. It looked like they worked; they didn't grow any bacteria or anything like that so we kind of did it just to see if we could, and then fortunately we never ran into a situation that we had to.

GB: Well, I hope that continues. What have you learned through your work during this period? Has anything in particular piqued your interest? Has anything surprised you, and is there anything that you would implement post-COVID that you all have been looking into or doing right now?

QW: Post-COVID, I would say the main thing I guess that's piqued my interest is just seeing how certain positions or people are able to telework, saying how they're able to still do their jobs from home, and it's really helpful for the people. I don't have any kids yet, but I do know some co-workers, because they're able to work from home, it's allowed them the opportunity to still work but also provide for their family. I've seen that as an interesting dynamic. I would like to see that at least for people that, hey, have to come to work. You know, why make people come to work when they can still be productive at home? So yeah, it doesn't affect me because as a veterinarian I [have] to come in regardless, but I'd like to see that for other people, they can still have that opportunity.

GB: Yeah, definitely. What has it been like to be on campus during the pandemic? So many of us are at home and haven't been to campus for months.

QW: It [was] much quieter, I'll say, when [the] pandemic first happened, and things shut down. It used to take me like 45 minutes to get to work. Now I'm getting to work in like 25 minutes. Almost no traffic. Traffic is starting to pick up again, but it's still a whole lot better than it was because normally 495 is a nightmare in the morning. But I guess the downside is that because it's so quiet, you don't have the cafeterias open. You don't have social events going on, or you're not able to go to any conferences or meetings so you do miss that aspect of it. For the most part coming on campus is you just kind of go to work. There's not a whole lot else going on, unfortunately.

GB: How has COVID impacted you personally?

QW: Personally, I'm fortunate that I have not lost anybody to COVID. I have had a few family members get sick but thank God they were able to recover. I'll say personally the main thing is just being careful and then as far as I like to be social, so I'm used to have people over my house and things like that. Unfortunately, I've had to miss out on things of that nature. I'm originally from Chicago so when I moved to Maryland, it was just me and my wife. We don't have any family here so it's been a little bit isolated just because we haven't been able to travel as much as we would like to. We haven't seen our parents, other family members. So we're looking very forward to getting vaccinated and being able to travel again and be able to see our parents.

GB: When do you think you will be vaccinated? I'm sure that you are high priority being that you work with the animals.

QW: Oh we're not sure. I know the NIH is really working on it. The hard part is that it's just the supply issues so once they get enough supply. I know I'm in, I guess I'm in group 1C, so they're looking at it could be later this month; it could be next month, you know. I'm just not really sure right now.

GB: Okay. I'm sure you'll be very eager for that. This is a fun question. What has been your favorite COVID meme, cartoon, or parody that has come out to date?

QW: I would say it was one that was really early on. It's a video of Cardi B saying "coronavirus" like really loud. There [are] some memes about it just getting stuck in people's heads. I don't know why that just really tickled me.

GB: Yeah! Is there anything else that you would want to add as an NIH clinician but also as a person who is living through the pandemic?

QW: I guess I would like to add that it's been kind of amazing how fast that we were able to come up with a vaccine. One of the reasons for that was kind of having to deal with my role and other people in similar roles, the researchers, veterinarians, and care staff who take care of animal research. There was a lot of work that was done with coronavirus before with SARS. So because we already had that preliminary data, we were able to take that information and create something for COVID-19 and quickly come out of the vaccine.

GB: Right.

QW: Had that not happened I don't know how long it would take us to come with a safe and effective vaccine. So I know some people are kind of nervous about taking it, but there's lots of people that you know taking it safely, and there's only one way that we can get out of this, and that's together if we all—most of us—get vaccinated so we can go back to living our lives like normal.

GB: Definitely. Thank you very much for your service, and I hope that you and your family continue to stay safe.

QW: Thanks for having me.

GB: Absolutely!